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WYO-215 (07/03)

LO#: \_\_\_\_\_

**School Attendance/Approved Training**  
Fact-Finding

Name: \_\_\_\_\_

SSN: \_\_\_\_\_ BYE: \_\_\_\_\_

1. What school (name and address) are you attending or planning to attend?

\_\_\_\_\_  
\_\_\_\_\_

2. Have you enrolled? Yes \_\_\_\_\_ No \_\_\_\_\_

A. When? \_\_\_\_\_

3. What date did you or will you start school? \_\_\_\_\_

4. What occupation are you going to school to learn? \_\_\_\_\_

5. When do you plan to complete this training course? \_\_\_\_\_

6. Please complete the section below for work dates and hours you attended school for the past 1 1/2 years.

A. If yes, complete the following chart.

B. If no, complete only the employer side of the chart.

Name of Employer	Worked		Dates Worked	Attended School		Dates of School
	Days	Times		Days	Times	

7. What hours are you available for work? \_\_\_\_\_

\_\_\_\_\_

8. What kind of work are you currently \_\_\_\_\_

\_\_\_\_\_

9. Will you drop or change your class schedule to accept work? Yes \_\_\_\_\_ No \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ BYE: \_\_\_\_\_

**Approved Training Request**

I am requesting Approved Training status. Yes \_\_\_\_ No \_\_\_\_

If no, skip questions 10-20 and sign the format the top of page 3. If yes, complete the rest of the form.

10. Is this training paid by TAA/NAFTA or WIA? Yes \_\_\_\_ No \_\_\_\_

11. Have you completed part of a training program already? Yes \_\_\_\_ No \_\_\_\_

A. If yes, explain. \_\_\_\_\_

12. Are you planning to continue or finish this training at another school? Yes \_\_\_\_ No \_\_\_\_

A. If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

13. Will your training result in a:

\_\_\_\_ GED or H.S. Diploma

\_\_\_\_ Certificat \_\_\_\_\_

\_\_\_\_ Associate's Degree Tvpe: \_\_\_\_\_

\_\_\_\_ Bachelor's Degree Tvpe: \_\_\_\_\_

\_\_\_\_ Other \_\_\_\_\_

14. Which of the following do you currently hold?

\_\_\_\_ GED or H.S. Diploma

\_\_\_\_ Certificate (type) \_\_\_\_\_

\_\_\_\_ Associate's Degree Type: \_\_\_\_\_

\_\_\_\_ Bachelor's Degree Tvpe: \_\_\_\_\_

\_\_\_\_ Other \_\_\_\_\_

15. How many total classroom hours will you be in school each week? \_\_\_\_\_

A. Credit hours? \_\_\_\_\_

16. What hours will you be attending school?

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

17. Are you training?(check one) To upgrade present skills \_\_\_\_\_ To learn a new occupation \_\_\_\_\_

18. What are your work skills? \_\_\_\_\_

19. Do you feel you can find a job with your current skills? Yes \_\_\_\_ No \_\_\_\_

A. Explain: \_\_\_\_\_

20. If work is not available in this geographical area after you complete your training, are you willing to relocate? Yes \_\_\_\_ No \_\_\_\_

**School Attendance/Approved Training (cont)**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ BYE: \_\_\_\_\_

Name of advisor or contact at the school: \_\_\_\_\_

His or her phone number: \_\_\_\_\_

**You must attach a copy of the school schedule or provide it as soon as it's available for this form to be complete.**

**If I am requesting Approved Training, I understand I must continue to seek work until I am notified that I am approved and have enrolled for the training.** Failure to seek work may result in loss of my benefits for the weeks involved. The above facts are true to the best of my knowledge and belief. I am aware that this information will be verified.

Claimant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Information: \_\_\_\_\_

**Employment Certification**

This section **must be completed** by an Employment Services Representative before a determination can be made on your request for Approved Training.

1. Do the claimant's current job skills offer minimal employment opportunities? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: \_\_\_\_\_

2. Are the claimant's current job skills obsolete? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: \_\_\_\_\_

E.S. Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return to:

Wyoming Department of Employment  
Unemployment Insurance Division  
PO Box 2760  
Casper WY 82602